

**DEPARTMENT OF WORKFORCE
DEVELOPMENT**

Secretary Roberta Gassman
201 East Washington Avenue
P.O. Box 7946
Madison, WI 53707-7946
Telephone: (608) 266-7552
FAX: (608) 266-1784
www.dwd.state.wi.us



**State of Wisconsin
Governor Jim Doyle**

**DEPARTMENT OF HEALTH AND
FAMILY SERVICES**

Secretary Helene Nelson
1 West Wilson Street
P.O. Box 7850
Madison, WI 53707-7850
Telephone: (608) 266-9622
FAX: (608) 266-7882
www.dhfs.state.wi.us

**TO: Economic Support Supervisors
Economic Support Lead Workers
Training Staff
Child Care Coordinators
W-2 Agencies**

**FROM: Amy Mendel-Clemens
Communications Section
Bureau of Health Care Eligibility**

BHCE/BWP OPERATIONS MEMO

No.: 03-53

Date: 08/23/2003

Non W-2 [X] W-2 [X] CC []

PRIORITY: HIGH

SUBJECT: DRUG FELON POLICY AND CARES CHANGES

CROSS REFERENCE:

Wisconsin State Statute 49.79 - Food Stamp Program
Food Stamp Handbook, 19.02.00 (drug felons)
Wisconsin State Statute 49.145(2)(v) – Wisconsin Works
Program

EFFECTIVE DATE:

August 23, 2003

PURPOSE

This memo clarifies the Food Stamp Program (FS) and Wisconsin Works (W-2) Drug Felon policies and outlines the changes made to related CARES screens. The verification of a 'Drug Felon Conviction' and the verification of the date the conviction occurred are no longer required.

BACKGROUND

Ops Memo 01-51 required workers to ask for and verify the conviction of a drug felony for customers who applied for FS or W-2. This process is no longer required.

POLICY

W-2 Program

State Statute 49.145(2)(v) requires only a written statement from the customer at the time of application as to whether there was a felony drug conviction and if so, when.

Food Stamp Program

State Statute 49.79(5)(a) states that an applicant for, or recipient under, the Food Stamp Program must state in writing whether s/he or any member of the his/her household has been convicted, in any state or federal court of a felony for possession, use, or distribution of a controlled substance.

The customers' signature on the CAF is sufficient to satisfy this requirement

CARES CHANGES

As of August 23, 2003, the following changes will be made to CARES.

The following three fields will be removed from screen ANDF:

1. "Was this a conviction in the last five years? (Y/N)".
2. Corresponding "VR" field.
3. "VR" for "Date on Which the Conviction Occurred" question.

The last question on ANIQ will be changed to read:

HAS ANYONE IN THE HOUSEHOLD APPLYING FOR FS OR W2 BEEN CONVICTED OF A DRUG FELONY IN THE PAST 5 YEARS? (Y/N/?/F/O)

If Yes is answered and Y entered, screen ANDF will be scheduled and specific information regarding the conviction date, drug test and sanction dates will be required.

IMPACT ON OTHER PROGRAMS

This drug felon policy has no effect on any other assistance program.

CONTACTS

BHCE CARES Information & Problem Resolution Center

Email: carpolcc@dhfs.state.wi.us
Telephone: (608) 261-6317 (Option #1)
Fax: (608) 267-2269

Note: Email contacts are preferred. Thank you.

DHFS/DHCF/BHCE/JE